PLACE OF BIRTH	_			¥
1. County of Gila,	ARIZON	IA STATE BOA	ARD OF HEAL	TH
District of Globe,			04-4- T-3- 3V	120
Town of		TTAL STATISTICS	State Index No County Registrar No.	
or 0.3 -1	OMIGNAL OLATI	PIONIE OF BINIF	Local Registrar No.	
Globe,			=	
	(If birth occurred in a	hospital or institution, give	its NAME instant of str	reet and number)
3. Sex of Child To be answered ONLY	4. Twin, triplet or	other		
Female in event of plural births.	5. No., in order of	Ves	7. Date 4 4 Month Da	y Year
8. FATHER		14.	MOTHER	
Full name Joe Chavez,		Full maiden name	Ruby Espetia	
9. Residence (Usual place of abode) If nonresident, give place and state	Globe,	15. Residence (Usual place of abod If nonresident, give pl		be,
19. Color or race			ace and state	
	birthday 36 (Years)	16. Color or race	i7. Age at last birthdo	20 (Years)
12. Birthplace (city or place) (State or country)	lfton,	18. Birthplace (city or p	TO Doo	
13. Occupation		19. Occupation		
Nature of industry Boilerma	ıker,	Nature of industry	House	ewife,
(Taken as of time of birth of child herein		xeaa	e precautions taken again nia neonatorum?	Yes•
I hereby certify that I attended the birth of *When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows	of this child, who was	Born alive or stillborn.) De, Ariz.	nt 5,30 m, on the (Physician or midwife)	date above stated.
Given name added from a supplemental report	Filed +	1-10, 1913		.04
Month, day, year.	Filed S	-5 1928	P W Log	Registrar.
Registrar.			Count	- Pariste-

139-404-951